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APPLICANTS

Frederick A. Perner, Palo Alto, CA;

Jonathan Jedwab, Vancouver, CANADA;
James A. Davis, Richmond, VA;David McIntyre, Boise, ID;
David Banks, Bristol, UNITED KINGDOM;
Stewart Wyatt, Boise, ID;
Kenneth K. Smith, Boise, ID;

** CONTINUING DATA *****

N/ITN

** FOREIGN APPLICATIONS *****

N/ITN

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Met after Allowance			
Verified and Acknowledged _____ Examiner's Signature	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Initials	DRAWING 8	CLAIMS 30	CLAIMS 5

ADDRESS

22879
HEWLETT PACKARD COMPANY
P O BOX 272400, 3404 E. HARMONY ROAD
INTELLECTUAL PROPERTY ADMINISTRATION
FORT COLLINS , CO
80527-2400

TITLE

Memory device

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